PREVALENCE AND PATTERNS OF MENTAL HEALTH CO-MORBIDITY AMONG CONSUMERS ACCESSING AUSTRALIA'S FIRST OLDER ADULT-SPECIFIC ALCOHOL AND OTHER DRUG TREATMENT SERVICE

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Introduction and Aims:

There is good data regarding the prevalence and patterns of dual diagnosis among the general population [1]; however, data regarding the older adult cohort is limited [2]. This research aimed to extend knowledge of the prevalence of dual diagnosis among older adults and the impact that this has on service utilisation, given the additional ageing complexities such as; physiology, medication interactions, medical co-morbidities and psycho-social factors.

Method:

A retrospective audit was conducted of people accessing an older adult-specific Alcohol and Other Drug (AOD) treatment service over a one year period. Key variables included demographics, substances of use, mental health diagnoses. Regression analysis was used to determine differences in groups with and without dual diagnosis and factors influencing treatment outcome.

Results:

A total of 45 males (M = 65.5 years; SD = 4.8) and 34 females (M = 66.8; SD = 6.8) clients were discharged from the service over the 12 month period. 89% (n=70) of clients had at least one co-morbid mental illness. Clients with a dual diagnosis were younger than those without. Clients with anxiety were less likely to complete treatment and those with a personality disorder more likely to require additional services.

Discussions:

This highlights the rates of dual diagnosis in a specific group of older adults. Clients with mental health problems required additional service utilisation and complex factors impacted their completion of treatment. This is the first study we are aware of examining the prevalence and patterns of dual diagnosis among people accessing an older adult-specific AOD treatment service.

Implications for Practice or Policy:

The results of the study will assist in the development of dual diagnosis services for older adults. The rates of dual diagnosis are high and some clients require additional service utilisation. The study highlights the importance of focusing on anxiety reduction techniques among people who screen high on anxiety to improve their engagement.

References:

 [1] Australian Institute of Health and Wellbeing. (2014). 2013 National Drug Strategy Household Survey: Detailed report. Canberra: Australian Institute of Health and Wellbeing.
[2] Searby, A., Maude, P., & McGrath, I. (2015). Dual diagnosis in older adults: A review. Issues in mental health nursing, 36(2), 104-111.